

11-29-11

109/588037

DATE	
TOTAL CLAIMS	
INDEPENDENT CLAIMS	
MULTIPLE BENEFICIARY CLAIMS	

293	

NAME	790
AGE	
SEX	
DATE	

Small intestine

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	DEPENDENT EXTRA
	Total (37 CFR 1.56(c))	20	Minus	29	0
	Independent (37 CFR 1.56(d))	3	Minus	3	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS

RATE	ADDITIONAL FEE
9	
44	
150	
TOTAL	

DATE	AMOUNT
18	
08	
300	
TOTAL	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT ENTRA
Total (37 CFR 1.106(e))	- 20	Minus	- 29	= 1
Independent (37 CFR 1.16(b))	- 3	Minus	- 3	=

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE
\$ 9	
x 44	
+ 150	
TOTAL	
ADDITIONAL FEE	

	RATE	ADDITIONAL RENTAL PERCENT
OR	18	
OR	00	
OR	300	
OR	TOTAL	
OR	ADDITIONAL FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (17 CFR 1.1602)	*	Minus	**
Independent (17 CFR 1.1603)	*	Minus	***	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE
9	
44	
150	
TOTAL	
ADDITIONAL FEE	

OR		ADD
OR		TION
OR		FILE
OR	18	
OR	88	
OR	300	
OR	TOTAL	
OR	ADD FILE	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 1, enter "0".
 - If the "Highest Number Previously Paid For" IN THIS SPACE is less than 1, enter "0".
- The "Highest Number Previously Paid For" does not include entries in the first column.

The "Highest Number Previously Paid For" (Total or Independent) of the last _____